Application or Docket Number

PATENT APPLICATION FEE DETERMINATION RECORD

Effective January 1, 2003

CHANG=149A

		CLAIMS AS	(Column 1) (C			umn 2) SMALL ENTITY		YTITY	OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS			6				RATE	FEE]	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA		BASIC FEE	375.00	OR	BASIC FEE	750.00
TOTAL CHARGEABLE CLAIMS			6 minus 20=		* 0		X\$ 9=		OR	X\$18=	
INDEPENDENT CLAIMS			/ minus 3 =		* O		X42=		OR	X84=	
MU	LTIPLE DEPEN	IDENT CLAIM PI	RESENT				+140=		OR	+280=	
* If	the difference	in column 1 is	less than zero, enter "0" in column 2			olumn 2	TOTAL	37	OR	TOTAL	
CLAIMS AS AMENDED - PART II							SMALL	ENTITY	OR	OTHER SMALL	
		(Column 1)	Annual Control	(Colur		(Column 3)	SIVIALL			SHALL	
AMENDMENT A		REMAINING AFTER AMENDMENT		NUMI PREVIO PAID	BER OUSLY	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	X\$ 9=		OR	X\$18=	
	Independent	* ENTATION OF M	Minus	PENDENT	- CL AIM	=	X42=		OR	X84=	
L	THOTTRESE	ATAION OF M		. LINDEINI	CLANVI		+140=		OR	+280=	
							TOTAL		OR	TOTAL	
		(Column 1)		(Colur	mn 0)	(Column 3)	ADDIT. FEE	L	1	ADDIT. FEE	
		CLAIMS	May 1. Water	HIGH	EST	(Column 3)		ADDI	1		ADDI
AMENDMENT B		REMAINING AFTER AMENDMENT		PREVIO PAID	OUSLY	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	X\$ 9=		OR	X\$18=	
	Independent	* NTATION OF MI	Minus	***	- CL A184	=	X42=		OR	X84=	
<u> </u>	I INST PRESE	INTALION OF MI	OLITE DE	FENDENI	CLAIM		+140=		OR	+280=	
									OR	TOTAL ADDIT. FEE	
		(Column 1)		(Colur		(Column 3)	ADDIT. FEE				
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	X\$ 9=		OR	X\$18=	
ME	Independent	*	Minus	***		=	X42=			X84=	
	FIRST PRESE	NTATION OF M	ULTIPLE DE	PENDENT	CLAIM		7.72-		OR	7.07-	
*	if the entry in colu	ımn 1 is lees than t	he entry in col	umn 2 weite	, "Ω" in on	lump 3	+140=		OR	+280=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." TOTAL ADDIT. FEE											
		nber Previously Pa					found in the ap-	propriate bo	x in co	lumn 1.	